

Healthy Child Care



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Buckle Up America

As part of Buckle Up America Week May 19 - 26, the Missouri Division of Highway Safety urges everyone to practice a lifesaving habit of buckling up! Motor vehicle crashes are the leading cause of unintentional injury deaths for children ages one to 17.

"You never know when a crash is going to happen," said Joyce Shaul, director of the Missouri Division of Highway Safety. "People have been killed at speeds as low as 20 miles per hour and in parking lots, so people must be properly restrained on every trip, no matter how short a distance you're going to travel."

According to the National Highway Traffic Safety Administration (NHTSA), the appropriate restraint device will change depending on a child's age, height and weight. NHTSA recommends using several types of restraints to protect a child from birth to adulthood.

The 4 Steps for Kids are:

1. Rear-facing infant seats in the back seat from birth to at least 20 pounds.
2. Forward-facing toddler seats in the back seat from age one and 20 pounds to about age four and 40 pounds.
3. Booster seats in the back seat from about age four and 40 pounds to at least age eight, unless 4'9" tall.
4. Safety belts at age eight or older or taller than 4'9". All children ages 12 and under should ride in the back seat.

According to a 2002 National SAFE KIDS Campaign study, more than 81 percent of child restraints are used incorrectly, including 88 percent of forward-facing toddler seats, 86 percent of rear-facing infant seats and 85 percent of safety belts, as

determined at child passenger safety seat inspection stations across the country. If you have questions about safety belt or child safety seat use, you should locate a certified child passenger safety technician in your area. A list of technicians can be accessed at www.nhtsa.dot.gov or by calling Missouri Division of Highway Safety at (800) 800-2358.

Article written by Jackie Allen, Child Passenger Safety Technician/Instructor, Missouri Division of Highway Safety

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Ask the Bureau

This column addresses some of the frequently asked questions from child care providers, directors, and staff. If you would like to ask a question of the Bureau of Child Care to be considered for this column, please email ralstj@dhss.state.mo.us.

How do I know if the training I have attended counts toward my required 12 hours of annual training?

All providers, assistants, directors, group home providers, caregivers, and volunteers who are counted in staff/child ratio are required to obtain at least twelve (12) clock hours of child care related training during each year of employment. Training is approved by the Bureau of Child Care in the following areas:

- ✓ Health
- ✓ Safety
- ✓ Nutrition
- ✓ Guidance and Discipline
- ✓ Appropriate Activities and Learning Experiences for Children
- ✓ Positive Communication and Interaction with Parents
- ✓ Planning and Setting Up an Appropriate Environment for Children
- ✓ Professional and Administrative Practices or
- ✓ Other Child Related Areas

Training clock hours are to be earned and recorded from January 1 through December 31 of any given year. Training taken in October, November, or December can apply to the next year if the current year's requirement has been met.

Child care facility directors and staff may conduct up to three (3) of the twelve (12) annual training clock hours for their own staff at their respective child care facility. Routine staff meetings do not count for annual training clock hours.

For questions regarding training counting toward the twelve (12) hour annual requirements, please contact your Child Care Facility Specialist.



National Child Care Provider Appreciation Day - May 9, 2003

Provider Appreciation Day is a special day to recognize child care providers, teachers and educators of young children everywhere. The Bureau of Child Care would like to take this opportunity to recognize the important work that you do and to say Thank You. Enjoy your special day.

This publication provides topical information regarding young children who are cared for in child care settings. We encourage child care providers to make this publication available to parents of children in care or to provide them with the web address so they may print their own copy.

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Consumer Product Safety Commission

The U. S. Consumer Product Safety Commission (CPSC) is an independent federal regulatory agency that works to reduce the risk of injuries and deaths from consumer products. You can reach the CPSC through:

- ◆ The CPSC toll-free Hotline at (800) 638-2772 or (800) 638-8270 for the hearing and speech impaired.
- ◆ The CPSC web site address at www.cpsc.gov

How to Obtain Recall Information

The U.S. CPSC issues approximately 300 product recalls each year, including



many products found in child care settings.

Many consumers do not know about the recalls and continue to use potentially unsafe products. As a result, used products may be loaned or given to a charity, relatives, or neighbors, or sold at garage sales or secondhand stores. You can help by not accepting, buying, lending, or selling recalled consumer products. You can contact the CPSC to find out if prod-

ucts have been recalled, and, if so, what you should do with them. If you have products that you wish to donate or sell and you have lost the original packaging, contact the CPSC for product information.

To receive CPSC's current recall information automatically by e-mail or fax or in a quarterly compilation of recalls sent by regular mail, call CPSC's hotline and after the greeting, enter 140, then follow the instructions given.

Each issue of this newsletter will highlight a recalled product or a safety issue; however, it would be wise to check with the CPSC on a regular basis for more comprehensive information.

Recall to Repair Gerry® and Evenflo® Portable Wood Cribs

In cooperation with the U.S. Consumer Product Safety Commission (CPSC), Hufco-Delaware Company, of Miamisburg, Ohio, and Evenflo Company Inc., of Vandalia, Ohio, are recalling about 364,000 portable wood cribs. If the hardware used to assemble the crib is not tight, the mattress support platform and mattress can fall to the floor. This poses a risk of injury to young children in the crib. There have been 41 reports of mattresses falling through portable wood cribs. Of these incidents, 17 children suffered bumps, bruises or scratches.

The portable cribs are made of wood and are smaller than traditional baby cribs. The majority of these portable wood cribs were sold under the Gerry® brand name, and some were sold under the Evenflo® brand name. The recalled portable wood cribs have one of the following model numbers that can be found on a label on the mattress platform underneath the mattress: 8212 8222 8232; 8242 8252 8282; 8301 8302 8311 8312 8321 8322 8331; 8332 8341 8342 8351 8352 8381 8382; 8512 8522 8532 8542 8552 8582; and 8712 8752.

Department and baby products stores nationwide sold these portable wood cribs from January 1991 through December 2002 for about \$99.

Consumers should stop using these portable wood cribs immediately, and call (800) 582-9359 anytime for a free upgrade kit that provides additional support for the mattress platform. Consumers also can obtain further information about the portable wood cribs by logging onto www.evenflo.com/cs/sc/cssc99.phtml?rid=EFR2&src=WEB

No other cribs are included in this recall.

Asthma & Allergy Awareness Month



With asthma reaching epidemic proportions in children under the age of five, and nearly 13 million preschoolers spending their day in some type of child care setting, the Asthma and Allergy Foundation of America (AAFA) has launched an aggressive campaign to arm child care providers and parents with the tools they need to care for youngsters with these diseases.

May is Asthma and Allergy Awareness Month and the AAFA, and its national network of chapters will be reaching out to child care providers across the country to teach them and parents how to “Get a Jump Start on Asthma and Allergies.”

In May, the AAFA is asking parents to complete an “Asthma and Allergy Action Plan” with the assistance of their child’s doctor. The plan, which will be given to the child care provider, lists the child’s medications and instructions on when to use them, tips on recognizing the signs and

symptoms of an asthma or allergy episode and steps on how to handle an emergency. Providers and parents will also be asked to walk through the facility and fill out an “environmental check list” that pinpoints possible allergens and irritants that could set off a child’s asthma or allergies.

The campaign is supported by the Department of Health & Human Services, Administration for Children and Families, Child Care Bureau and the National Child Care Association.

The AAFA is a national not-for-profit, voluntary health agency dedicated to improving the quality of life for people with asthma and allergies through education, advocacy and research.

For more information on the “Get a Jump on Asthma and Allergies” program call 800-727-8462, or contact your local AAFA chapter.

What is Asthma?

Asthma is the most common chronic illness among children. It impacts 7 to 10 percent of all preschool age youngsters. If not controlled, asthma often leads to sleepless nights, limitations on exercise, absenteeism from school, hospitalization, and in some cases, death. However, with proper diagnosis, good treatment, and preventive measures to reduce exposure to environmental triggers, the complications from

asthma can be controlled and a child’s quality of life greatly improved.

Facts About Asthma

✓ An estimated 17 million Americans suffer from asthma; nearly 5 million are under age 18. It is the most common chronic childhood disease, affecting more than one child in 20.

✓ Among children ages 5 to 17, asthma is the leading cause of school absences from a chronic illness. It accounts for an annual loss of more than 10 million school days per year and more hospitalizations than any other childhood disease. Children with asthma spend an estimated 7.3 million days per year restricted to bed.

What is an Allergy?

An allergy is a specific reaction to a normally harmless substance, one that does not bother most people. Allergic people often are sensitive to more than one substance. Allergens enter the body in one of three ways. Airborne particles such as pollen, dust and mold spores, are breathed in through the nose and mouth; insect venom is injected through stingers; foods are ingested or swallowed. Medicines that can cause allergic reactions are injected or ingested. More than half of all allergy sufferers fail to recognize their symptoms at first, falsely

believing they have a cold or the flu.

Facts About Allergies

✓ An estimated 50 to 60 million Americans, about one of every five adults and children, suffer from allergies, including allergic asthma. Allergies are the sixth leading cause of chronic disease in the United States.

✓ Allergies have a genetic component. If only one parent has allergies, chances are one in three that each child will have an allergy. If both parents have allergies, it is much more likely (7 in 10) that their children will have allergies.

✓ More than 33 million Americans suffer from chronic sinusitis.

✓ Allergies are the most frequently reported chronic condition in children, limiting activities for more than 40 percent of them.

✓ An estimated two million Americans develop severe allergic reactions to insect stings.

✓ Food allergies are believed to occur in eight percent of children younger than three years old. Approximately 200 deaths per year are due to food allergy.

What Can Caregivers Do?

If you provide care for a child with a known allergy or diagnosed asthma, follow the written instructions of the parents. As a caregiver, you need to have an individualized plan for care on file that has come from a professionally qualified source, such as a physician or a nurse. In addition, make sure your child care facility is as asthma friendly as possible. That includes:

- ✓ making the setting free of tobacco smoke at all times;
- ✓ making sure the facility has good ventilation; and
- ✓ making sure there is a written, individualized emergency plan for each child in case of a severe asthma attack.

You should also make sure that allergens and irritants that can make asthma worse are reduced or eliminated. These include:

- ✓ cockroaches;
- ✓ pets with fur or feathers;
- ✓ dust mites (commonly found in humid climates in pillows, upholstery, carpets and stuffed toys);
- ✓ mold; and
- ✓ strong odors or fumes from paint, perfumes, art and craft supplies, pesticides, air fresheners and cleaning chemicals.

A list of websites providing additional information about signs and symptoms, asthma management and related

CACFP Training Schedule

Orientation training for the Child and Adult Care Food Program for childcare centers* is held in the five district offices located throughout the state on the following dates:

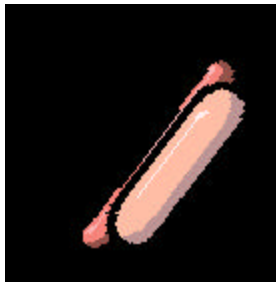
April 3, 2003
May 1, 2003
June 2, 2003
July 10, 2003

*Shelter and After-school training held separately.

Call 800-733-6251 to register for a training session in your area. Addresses and directions will be provided in the confirmation letter.

issues is available through the Department of Health and Senior Services. For more information about asthma in the child care setting, contact Terry Keck at (800)316-0935 or by email at keckt@dhss.state.mo.us.

Information for this article was taken from the Asthma & Allergy Foundation America website at www.aafa.org



Hot Dogs, An American Favorite

There are so many different ways to serve hot dogs, it is hard to count them all. From plain to all dressed up with a variety of condiments, to putting them in a baked bean casserole, hot dogs are a favorite among kids.

At first glance, hot dogs may seem an inexpensive alternative for a meat/meat alternate component. However, ounce for ounce, hot dogs do not provide as high a quality protein or as much iron and other nutrients as other raw or precooked, unprocessed meats. In addition, hot dogs are typically high in fat and loaded with salt and other preservatives, and may, in fact, contain cereals and fillers that can compromise their overall nutritional value. Despite the seemingly unlimited supply and variety at the grocery store, there are a lot of hot dogs that just don't measure up.

So what are we talking about here? Many varieties of hot dogs have added ingredients or fillers that reduce the amount of meat and protein in them and make them cheaper to produce. And money often seems to be the bottom line. However, these brands of hot dogs do not

meet the guidelines for the Child and Adult Care Food Program (CACFP). To be sure, CACFP wants children to be served hot dogs without added fillers. The cost is usually only a little more, and the nutritional value is much better. In addition, the CACFP guidelines recommend that hot dogs, as well as other highly processed lunch meats such as bologna, salami, Vienna sausages, and other types of sausages, not be served more than one time per week.

You know the old adage, "You get what you pay for"? Well, with many hot dogs the consumer is paying for fillers, not meat. Learn to read labels. Soy flour, soy protein, isolated soy protein, starch and starchy vegetable flour, dried milk, calcium reduced dried skim milk, and cereal are frequently added to hot dogs as binders, extenders and fillers. These ingredients are always listed on the label. Labeling regulations require that all ingredients be listed on the label in descending order of their amounts.

So what now? Does this mean all child care providers have to go out and read all those labels? Hardly. Most of the work has been done for you. A list has been compiled to include most brands of hot dogs readily available across the state that

can be used to meet the CACFP meal requirements. This list is not all-inclusive. If the hot dogs in your freezer are not on this list, then read the label for the list of ingredients.

CACFP Creditable Hot Dogs and Wieners

- ◆ Ballpark Beef Franks
- ◆ Ballpark Premium Kosher Beef Franks
- ◆ Bryan Beefy Jumbos
- ◆ Bryan Wieners
- ◆ Cloverdale Franks
- ◆ Dubuque Hot Dogs
- ◆ Farmland Bun Size Bacon & Cheddar Cheese Franks
- ◆ Farmland Deli Style Cheese Franks
- ◆ Farmland Deli Style Franks
- ◆ Farmland Hickory Smoked Franks
- ◆ Farmland Original Hot Dogs
- ◆ Kahn's Jumbo Franks
- ◆ Ohse Hickory Smoked Jumbo Franks
- ◆ Ohse Hickory Smoked Wieners
- ◆ Oscar Mayer Original Hot Dogs
- ◆ Pilgrim Pride Turkey Franks
- ◆ Wranglers' Beef Franks



Help is just a phone call away...

A child care phone list at your fingertips

**Missouri Department of
Health and Senior Services**
P.O. Box 570
Jefferson City, Mo. 65102
(all other inquiries)
573-751-6400
www.dhss.state.mo.us

**Bureau of Child Care
Central Office**
573-751-2450

**My Child Care Facility
Specialist**

TEL-LINK - Your telephone link
to health services for Missouri
families.

800-TEL-LINK

800-835-5465

(Missouri Relay 800-735-2966
for hearing impaired citizens)

**Nutrition & Child Care
Programs**
573-751-6269
800-733-6251

**Child Care Health
Consultation Program**
573-751-2450

On-site consultation, education
and training by health consultants
at no cost to care givers.

**My Local Child Care Health
Consultant**

Child Care Resource & Referral

**Missouri Child Care Resource
and Referral Network**
1-800-200-9017
www.moccrn.org

YWCA - St. Joseph
816-232-4481
800-404-9922

Children's Link - Shelbina
573-588-2533
800-201-7745

**Heart of America Family
Services - Kansas City**
913-342-1110
800-755-0838

**CMSU Workshop on Wheels-
Warrensburg**
660-543-8321
800-666-1461

**ChildCare Connection -
Columbia**
573-445-5627
800-243-9685

**Child Day Care Association-
St. Louis**
314-531-1412
800-467-2322

**Council of the Churches of the
Ozarks - Springfield**
417-887-3545
800-743-8497

**Southeast Missouri State
University - Cape Girardeau**
573-290-5571
800-811-1127

Other Important Numbers

**Child Abuse & Neglect
Hotline**
800-392-3738

Poison Control Center
800-222-1222

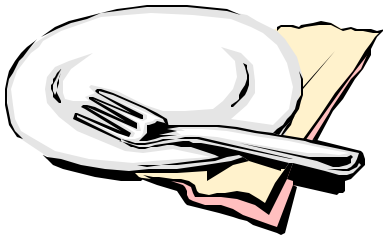
**Fire Safety/Training,
Inspections**
573-751-2930

**U.S. Consumer Product
Safety Commission**
To report safety problems or
inquire about recalls
800-638-2772
800-638-8279 (TDD)

My frequently called numbers:



Quiz: Food Safety in the Kitchen



What comes to mind when you think of a clean kitchen? Shiny waxed floors? Gleaming stainless steel sinks? Spotless counters and neatly arranged cupboards?

They can help, but a truly “clean” kitchen – that is, one that ensures safe food – relies on more than just looks. It also depends on safe food practices.

In child care facilities, food safety concerns revolve around three main functions

- ✓ food storage;
- ✓ food handling; and
- ✓ cooking.

To see how well you’re doing in each, take this quiz, and then read on to learn how you can make the meals and snacks from your kitchen the safest possible.

QUIZ

Choose the answer that best describes the practice in your facility.

1. The temperature of the refrigerator in my facility is:
 - a. 50 degrees Fahrenheit
 - b. about 40 degrees Fahrenheit or less
 - c. I don’t know; I’ve never measured it

2. The last time we served leftover cooked stew or other food with meat, chicken or fish, the food was:

- a. cooled to room temperature, then put in the refrigerator
- b. put in the refrigerator immediately after the food was served
- c. left at room temperature overnight or longer

3. The last time the kitchen sink drain, disposal, and connecting pipe in my facility were sanitized was:

- a. last night
- b. several weeks ago
- c. can’t remember

4. If a cutting board is used in my facility to cut raw meat, poultry, or fish and it is going to be used to chop another food, the board is:

- a. reused as is
- b. wiped with a damp cloth
- c. washed with soap and hot water
- d. washed with soap, rinsed with hot water and then sanitized

5. I clean my kitchen counter and other surfaces that come in contact with food with:

- a. water
- b. hot water and soap
- c. soapy hot water, then rinsed with hot water, and then sprayed with a bleach solution

6. When dishes are washed in my facility they are:

- a. cleaned by an

automatic dishwasher approved by the regulatory health authority and then air dried

- b. left to soak in the sink for several hours and then washed with soap in the same water

- c. washed right away with hot water and soap in the sink, rinsed, soaked in bleach water, and then air dried

7. The last time I handled raw meat, poultry or fish, I cleaned my hands afterwards by:

- a. wiping them on a towel
- b. rinsing them under hot, cold or warm tap water
- c. washing with soap and warm water

8. Meat, poultry, and fish products are defrosted in my facility by:

- a. setting them on the counter
- b. placing them in the refrigerator
- c. microwaving

ANSWERS

1. Refrigerators should stay 41 degrees Fahrenheit or less, so if you chose answer B, give yourself two points.

Measure the temperature with a thermometer, and if needed, adjust the refrigerator’s temperature control dial. A temperature of 41 degrees Fahrenheit or less is important because it slows

Can Your Facility Pass The Food Safety Test?

the growth of most bacteria. The temperature won't kill the bacteria, but it will keep them from multiplying. The fewer there are, the less likely you are to get sick from them. Freezing at zero degrees Fahrenheit or less stops bacterial growth (although it won't kill all bacteria already present).

2. Answer B is the best practice; give yourself two points.

Hot foods should be refrigerated as soon as possible within two hours after cooking. Don't keep the food if it's been standing out for more than two hours. Don't taste test it, either. Even a small amount of contaminated food can cause illness.

Date leftovers so they can be used within a safe time. Generally, they remain safe when refrigerated for three to five days. If in doubt, throw it out. It's not worth a foodborne illness for the small amount of food usually involved.

3. If answer A best describes your facility's practice, give yourself two points; for answer B, give yourself one point.

The kitchen sink drain, disposal, and connecting pipe are often overlooked, but they should be sanitized periodically by pouring down the sink a solution of 1

teaspoon of chlorine bleach in 1 quart of water. Food particles get trapped in the drain and disposal, and along with the moistness, create an ideal environment for bacterial growth.

4. If answer D best describes your facility's practice, give yourself two points.

If you picked A, you're violating an important food safety rule: Never allow raw meat, poultry, and fish to come in contact with other foods. Answer B isn't good, either. Improper washing, such as with a damp cloth, will not necessarily remove bacteria. Washing only with soap and water may not do the job, either.

5. Answers C earns you two points.

Bleach and EPA registered chemical sanitizing agents that are labeled for use on food surfaces are the best sanitizers – provided they're diluted according to product directions. They're the most effective at getting rid of bacteria. Hot water and soap do a good job, too, but they do not kill bacteria. Water may get rid of visible dirt, but not bacteria.

6. Answers A and C earn you two points.

There are potential problems with B. When you let dishes sit in water for a long time, it "creates a soup." The food

left on the dishes contributes nutrients for bacteria, so the bacteria will multiply. When washing dishes by hand, it's best to wash them all within two hours. Rinse them, and then soak them for at least two minutes in a luke-warm (not less than 75 degrees Fahrenheit) chemical sanitizing solution (about 1/2 teaspoon bleach per gallon of water). Also, it's best to air-dry them so you don't handle them while they're wet.

7. Answer C earns you two points.

Wash hands with warm water and soap for at least 20 seconds before and after handling food, especially raw meat, poultry and fish. If you have an infection or cut on your hands, wear rubber or plastic gloves. Wash gloved hands as often as bare hands because the gloves can pick up bacteria.

8. Answers B and C earn you two points.

Food safety experts recommend thawing foods in the refrigerator (one day per 4 lbs. of turkey), or the microwave oven, or putting the package in a water-tight plastic bag under running water.

Gradual defrosting overnight in the refrigerator is best because it helps maintain quality.

When microwaving, follow package directions. Leave about 2 inches between the food and the inside surface of the microwave to allow heat to circulate. Smaller items will defrost more evenly than larger pieces of food. Foods defrosted in the microwave oven should be cooked immediately after thawing.

Do not thaw meat, poultry, and fish products on the counter or in the sink without cold, running water; bacteria can multiply rapidly at room temperature.

Marinate food in the refrigerator, not on the counter. Discard the marinade after use because it contains raw juices, which may harbor bacteria. If you want to use the marinade as a dip or sauce, reserve a portion before adding raw food.

Reference: *"Can Your Kitchen Pass the Food Safety test?"* FDA Consumer, June 2002:
www.cfsan.fda.gov/~dms/fdkitchn.html

Adapted from an article by Paula Kurtzweil. Paula Kurtzweil is a member of FDA's public affairs staff.

Rating your facility's food practices:

16 points:

Feel confident about the safety of foods served in your center.

10-15 points:

Re-examine food safety practices in your center. Some key rules are being violated.

9 points or below:

Take steps immediately to correct food handling, storage and cooking techniques used in your center. Current practices are putting you and others in your center in danger of foodborne illness.

For more food safety information check out the following:
www.fightback.org
USDA's Meat and Poultry Hotline, (800) 535-4555
FDA's Food Safety Information Hotline, (888) 723-3366 (24-hours)
www.cfsan.fda.gov

Thanks for Your Help

The Bureau of Child Care would like to thank each of you who responded to the survey that was included in the Winter issue of the Healthy Child Care newsletter.

The survey results were very favorable and indicated a strong desire for the Bureau to continue the newsletter. A slim majority of respondents indicated that if the newsletter were only available on the Bureau of Child Care website they would be able to access it. At this time, the bureau plans to continue to print and mail the newsletter.

The responses also included a number of suggestions for articles. Those suggestions included topics such as activities for school-age children; dealing with 2 year olds; signs and symptoms of common illnesses; the benefits of outdoor play; information about the food pyramid; the importance of talking and singing to infants and toddlers; helping children deal with grief and loss; ideas for transition times; and how to hire and motivate staff. Be watching in upcoming issues for articles related to these and other topics.

Thank you again for your continued support of the newsletter.

Article provided by:
Janice Rambo, Department of
Health and Senior Services
573-751-6257

New Web Page Available Through the Family Care Safety Registry

The Family Care Safety Registry (FCSR) recently made a new web page available to employers with internet access who want to find out whether an individual is already registered with FCSR. Employers may go to <https://dhssweb02.dhss.state.mo.us/FCSR/FCSRweb.dll>, enter the individual's social security number, and the requestor will be told whether the individual is registered or not. If the individual is already registered, the employer may contact the FCSR using the toll-free telephone number, or mail, or FAX to request the background screening.

The FCSR, which recently celebrated its 2nd anniversary in operation on January 1st, is a service of the Department of Health and Senior Services that allows families and other employers to obtain background screening information maintained by various state agencies from a single source. Families and other employers can use the toll-free access line, FAX or mail to request a background screening at no cost on a caregiver already registered with the FCSR. The FCSR maintains a database of caregivers, including individuals employed by licensed and license exempt child care providers and child

care homes, long-term care facilities, home-health and hospice agencies, in-home service providers under contract with the Department of Health and Senior Services, foster parents and those providing services to the physically or mentally disabled. Over the last two years, the FCSR registered over 150,000 caregivers and responded to over 100,000 requests for a background screening.

For more information, contact the FCSR using the toll-free access line, (866)422-6872, available 7:00 a.m. to 6:00p.m., Monday through Friday or visit the website, www.dhss.state.mo.us/FCSR/.



April is Child Abuse and Neglect Prevention Month

Here are some ways to participate in and recognize this important month:

- ✓ Read to a child.
- ✓ Compliment a child. Encourage a child. It helps to build self-esteem.
- ✓ Listen to child's stories and dreams. Build his or her imagination.
- ✓ Color a special picture with a child. Hang it in a prominent place for all to see.
- ✓ Play your child's favorite game.
- ✓ Set a good example, demonstrate positive relationships.
- ✓ Wear a blue ribbon (the symbol to prevent child abuse).
- ✓ Become educated and involved in legislative children's issues.
- ✓ Visit the Prevent Child Abuse America Website at www.preventchildabuse.org.
- ✓ Learn how, when, and what to report about suspected child abuse.

Information provided by the Children's Trust Fund

Upcoming Dates and Events

April 1-30, Child Abuse Prevention Month. More information is available online at www.preventchildabuse.org or by contacting the Prevent Child Abuse America Communications Department at (312) 663-3520 or mailbox@preventchildabuse.org. or Missouri Children's Trust Fund at (573) 751-5147 or www.ctf4kids.org

NAEYC's Week of the Young Child

April 6-12, 2003

"Children's Opportunities—Our Responsibilities" More information is available by calling (800) 424-2460 or online at www.naeyc.org

May 1-31, Allergy and Asthma Awareness Month. More information is available online at www.aanma.org and www.ppsinc.org or by contacting the AANMA at (800) 878-4403 or aanma@aol.com.

May 3-10, National Safe Kids Week. More information is available online at www.safekids.org or by contacting the National Safe Kids Campaign at (202) 662-0600 or info@safekids.org.

May 4-10, Children's Mental Health Week. More information is available online at www.modmh.state.mo.us or by contacting the Missouri Department of Mental Health's Children and Youth Services at (800) 364-9487.

June 1-30, National Safety Month. More information is available online at www.nsc.org/nsm or www.asse.org or by contacting the National Safety Council Communications Department at (630) 775-2303.

NATIONAL ASSOCIATION FOR FAMILY CHILD CARE

2003 Conference

July 23 - 27, 2003

Buffalo, New York

More information available by calling (801)269-9338 or online at www.pafcc.org

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